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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/008,472	11/09/2001	David Hohl	LIFE052

CONFIRMATION NO. 5648

FORMALITIES LETTER



OC000000007267006

Robert C. Hall
Bozicevic, Field and Francis LLP
Suite 200
200 Middlefield Road
Menlo Park, CA 94025

Date Mailed: 01/04/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

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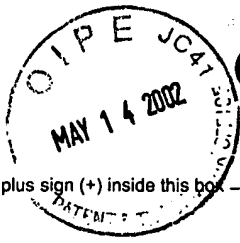
PART 2 - COPY TO BE RETURNED WITH RESPONSE

06/03/2002 SSALEEKU 00000005 500815 10008472

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05/16/2002 RHEBROHT 00000009 500815 10008472

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PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/008,472	
		Filing Date	November 9, 2001	
		First Named Inventor	HOHL, DAVID	
		Group Art Unit	2176	
		Examiner Name	To Be Assigned	
Total Number of Pages in This Submission		24	Attorney Docket Number	LIFE052
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
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<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> Request for Refund	3) Return Postcard		
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____			
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual Name	ROBERT C. HALL, Reg. No. 39,209			
Signature				
Date	5/3/2002			

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 3, 2002.	
Typed or printed name	Cindy Hoang
Signature	
Date	5/3/2002

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FEE TRANSMITTAL for FY 2002 <i>Patent fees are subject to annual revision.</i>		Complete If Known																													
TOTAL AMOUNT OF PAYMENT		Application Number	10/008,472																												
(\$) 400.00		Filing Date	November 9, 2001																												
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		Group Art Unit	2176																												
		Attorney Docket No.	LIFE052																												
METHOD OF PAYMENT		FEE CALCULATION (continued)																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 50-0815 Deposit Account Name Bozicevic, Field & Francis LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																													
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																															
FEE CALCULATION																															
2. BASIC FILING FEE																															
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**or number previously paid, if greater; For Reissues, see above.																															
		Other fee (specify) _____																													
		Reduced by Basic Filing Fee Paid																													
		SUBTOTAL (3) (\$) 400.00																													

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	ROBERT C. HALL	Registration No. (Attorney/Agent)	39,209
Signature		Telephone	(650) 327-3400
		Date	5/13/2002

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